MBCC Online Subgrant Application System Step-By-Step Instructions

<u>Important</u>: Please refrain from using the Browser's "Back" button to go back to a previous page. Use the "Continue" and "Back" buttons provided on the each page of the application to navigate through the application.



Login Screen:

Click on New User? Link to take you to the new user registration page. New User feature is for first time only.

NLINE SUBGRA	NT APPLICATION	N SYSTEM	Instructions	How do I?	Feedbac	
You must regi	ster for online appli	New User Registra ications at least 7 wor (All Fields Are Requ	king days before the a	pplication is du	e.	
Choose Login ID:	(4 to 20-Characters. No Spaces or Punctuations.) (Passwords must be at least 8 characters and are case-sensitive. Must also contain at least one letter. No punctuations or special characters allowed.)				ligit and at	
Password:	7011		Confirm Password:			
First Name:			Last Name:			
E-mail Address:			Phone:			
		Agency Informat	tion			
Agency Na	me:		Agency Type:	Select an Agency	Type 💟	
Addre	:55:		SSET AND VISIT ESCH			
City:			ST:	Zip:	-	
	nty: Choose Count		J. 1			
Cou			dan bumban feetbil.		-	
	r cuerai Employe	r or Payee Identificat	ion Number (FEIN):			
		Create				

New User Registration:

All fields are required and you will receive a pop up message if you didn't fill in a field.

Once all the fields are filled in, click the Create button to send a notice to MBCC that you have registered. MBCC will active you with in 5 business days.





Click on File A New Application to select a different RFP and start a new grant application.

Click **Log Off** to exit and log off.

Click **Saved Applications** to view or continue a saved RFP.

Click Continue to advance to the next screen and continue working on the selected Saved Application.

Click **Finalize** to finalize the selected application. An application cannot be edited or changed once it has been finalized.

Click **Print Draft** to go to the Draft PDF file of the selected application and print.

Click **Delete** to delete the selected application

ONLINE SUBGRANT API	PLICATION SYSTEM	Instructio	ns How do l?	Feedbac
	Section 1	. Face Page		
ace Page - Part 1				
Agency Name: Address:				
City:		ST:	Zip:	
County:	mnlover or Pavee Iden	Phone: tification Number (FEIN):		
		cy information, please e-mail Mi	BCC at mbcc@mt.gov	
			•	
rogram Street Address. (Do n	ot enter ir this is a non-	disclosed location)		
Address:				
City:		ST:	Zip:	

Section 1. Face Page

Face Page – Part 1 will auto populate. If changes are needed, e-mail the Board of Crime Control.

Click **Save and Continue** to Save Information and Continue to Next Page.

Click **Save** to Save Information on this Page.

Click **Log Off** to Exit and Log Off.

Click **Back** to go back to the Previous Page.

	CANADA ARMAN	NE COLUMN		
ONLINE SUBGE	RANT APPLICATION SYSTEM	Instructions	How do l?	Feedback
	Section 1. Face Page			
Face Page - Part 2	All Fields Are Required.			
Proj. Dir. Name:				
Proj. Dir. Title:				
Address:	(Please use business address)			
City:	ST:	Zip:		
County:	Phone:	E-mail:		
	Save and Continue Save Lo	g Off Back		

Section 1. Face Page

Face Page – Part 2. Enter information for project director. All fields are required.

Click **Save and Continue** to Save Information and Continue to Next Page.

Click **Save** to Save Information on this Page.

Click **Log Off** to Exit and Log Off.

Click **Back** to go back to the Previous Page.

ONLINE SUBGRANT APPLICATION SYSTEM	Instructions How do I? Feedback
Section 1. Fo	ce Page
Face Page - Part 3	-
* denotes requ	red fields.
*Project Title:	
*Project Duration(MM/DD/YYY): *Start:/	*End:/
**Other Federal Support: (If using other federal support on this project, it must be identified and explained):	
	w.
If previously funded, indicate the total numbe	r of months of federal support: If 'Other' Months =
*If a Continuation Grant, indica	te previous MBCC grant number:
Save and Continue	ve Log Off Back

Section 1. Face Page

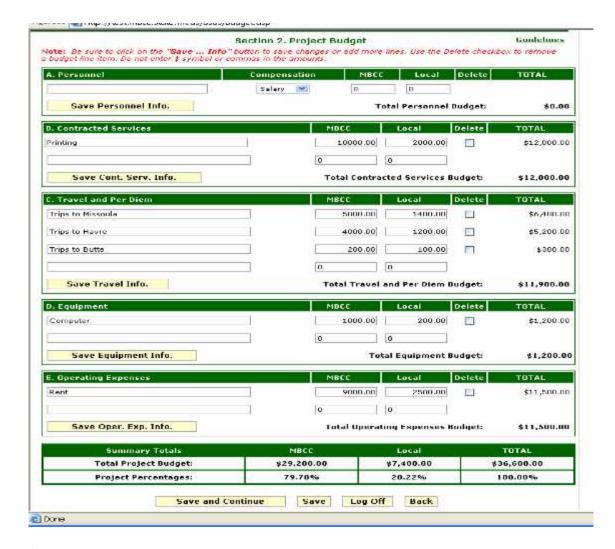
Face Page – Part 3. Enter information for Project Title, Project Duration, Other Federal Support. Complete remaining information as applicable.

Click **Save and Continue** to Save Information and Continue to Next Page.

Click **Save** to Save Information on this Page.

Click **Log Off** to Exit and Log Off.

Click **Back** to go back to the Previous Page.



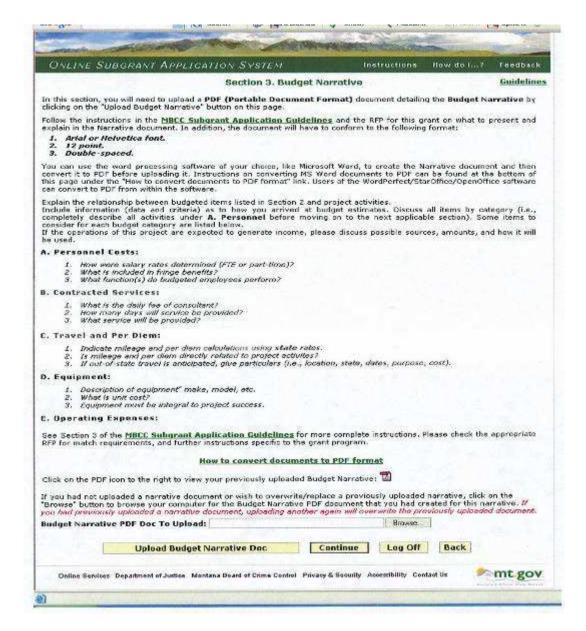
Section 2. Project Budget

Refer to the RFP and application guidelines regarding content information. The information you see in the categories is for example only. Enter the budget information for each line item you are requesting funds.

To enter project budget, tab to enter dollar amounts, if applicable, enter Local match. Click the Save ... Info. button to insert another row for each line item and save all the data.

If you need to delete a line, check the box under the Delete column and click the Save button at the bottom of the screen.

Once you have entered all your information for each line item, click the **Save and Continue** button at the bottom to go to the next screen.

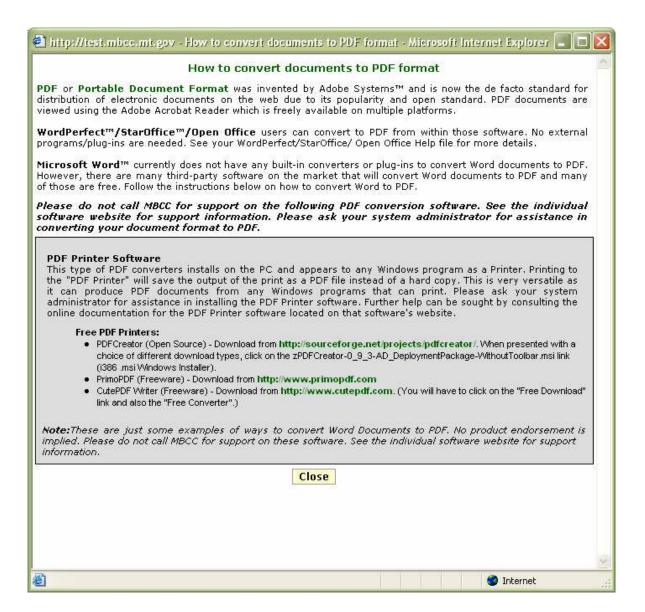


Section 3. Budget Narrative

The application can only accept PDF formatted documents. Follow instructions on **How to convert documents to PDF format** and upload the Budget Narrative documents into the application.

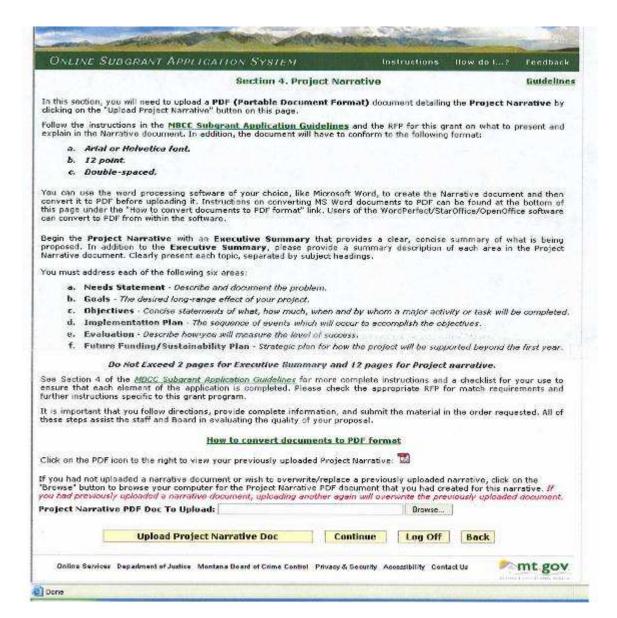
To find the Budget Narrative document on your computer, click Browse... and locate your document. Click Upload Budget Narrative Doc to upload into application.

Once you have successfully completed the upload, click Continue to go to next screen.



How to Convert to PDF Format

Please refer to instructions in above web box. Once you have successfully completed the conversion, click Close to take you back to the narrative screen you were previously using.

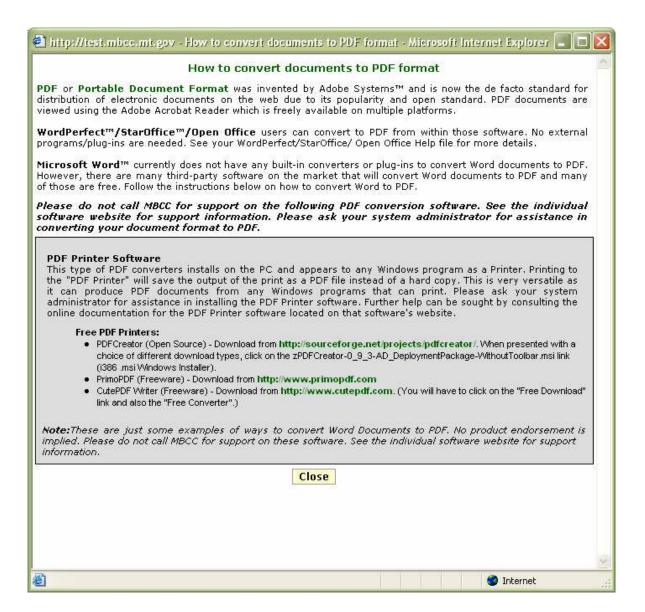


Section 4. Project Narrative

The application can only accept PDF formatted documents. Follow instructions on <u>How</u> to convert documents to <u>PDF format</u> and upload the Project Narrative documents into the application.

To find the Project Narrative document on your computer, click Browse... and locate your document. Click Upload Project Narrative Doc to upload into application.

Once you have successfully completed the upload, click Continue to go to next screen.



How to Convert to PDF Format

Please refer to instructions in above web box. Once you have successfully completed the conversion, click Close to take you back to the narrative screen you were previously using.

Section 5. Special Assurances and Conditions Assurances of Compliance with Civil Rights Act of 1964: The applicant hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964, as amended, and all requirements imposed by or pursuant to Regulations of the Department of Justice (28 CFR Part 42) issued pursuant to that title, to the end that no person shall on the ground of race, color, religion, national origin, sex, or disability be excluded from participation in, be denied the benefits of, or be subjected to discrimination under, or denied employment in connection with any program or activity funded in whole or in part with funds made available under this title. Non-supplanting Requirements: Funds or other resources of the applicant normally devoted to programs and activities designed to meet the needs of criminal justice will not be diminished in any way as a result of a grant award of federal funds. The project for which assistance is being requested will be in addition to, and not a substitute for, criminal justice services previously provided without federal assistance. Acceptance of this grant award requires the subgrantee organization or governmental entity to include this subgrant in the scope of their regularly scheduled annual or biennial audit. The audit must be conducted in accordance with the appropriate OMB Circular (A-128, A-133, A-102/Common Rule). Applicants Agreement: It is understood and agreed by the applicant: that any grant received as a result of this application shall be subject to the Grant Conditions and other policies, regulations, and rules issued by the Department of Justice for the administration of grant projects under (P.L. 100-690) including, but not limited to, the following: Competitive bids must be obtained for all equipment, construction and contracted services applications, as required by applicable local, state, or federal law or regulations. Accepting other than the lowest bid requires prior approval of the Board of Crime Control; 2. The grant may be terminated in whole, or in part, by the Board of Crime Control at any time; Appropriate grant records and accounts will be maintained and made available to the Montana Board of Crime Control, Office of the Legislative Auditor, or the Legislative Fiscal Analyst upon request; 4. The grantee shall assume the costs of improvements funded after a reasonable period of federal assistance; 5. If any agency other than the applicant is to contribute matching funds, that agency must document their contribution; 6. Any funds awarded under one subgrant cannot be used in another; 7. Expenditures for items not listed on the original budget are subject to refund and/or penalty. Variances from the approved subgrant will require an amendment approved in advance by the Board of Crime Control; 8. All applicants are subject to federal, state, and local laws and regulations; 9. The subgrantee shall not obligate any funds until subgrant is formally awarded by the Board of Crime Control; and 10. Draw down of funds is contingent upon submission of quarterly financial reports and quarterly progress reports 11. When issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with federal money, all grantees receiving federal funds shall clearly state: 1) the percentage of the total cost of the program or project which will be financed with federal money, and 2) the dollar amount of federal funds for the project or program. 12. Rules 23.14.101 et seq. of the Administrative Rules of Montana. 13. The subgrantee agrees to comply with the National Environmental Policy Act (NEPA) and other related federal environmental impact requirements in the use of these grant funds either directly or indirectly by subcontractors. In the event a Federal or State court of Federal or State administrative agency makes a finding of discrimination after a due process hearing on the grounds of race, color, religion, national origin, sex, disability, or age against a recipient of funds, the recipient will forward a copy of the funding to the Office of Civil Rights, Office of Justice Programs. The Official Budget Representative signature in Section 6 certifies agreement with this Special Assurances and I Agree Log Off Back

Section 5. Special Assurances and Conditions

Done

Click **I Agree** confirms that **Section 5. Special Assurances and Conditions** have been read and agreed to by the Official Budget Representative.

Click **Log Off** to Exit and Log Off.

Click **Back** to Go back to Previous Page.

ONLINE SUB	GRANT APPLICATION	SYSTEM	Instructions	How do I?	Feedback
	S	ection 6. Signatur	e Page		
		lequired except for required for Cities/	Clerk/Clerk Recorder Counties only)		
DF document and	l appear in the generated sign. All required parties	s must sign. Then m	all this page to MBCC.		
atus.	organizations must also				
all terms and co	ertify this document to in- inditions relating to this a liw is NOT acceptable. (Ple	pplication. Duplicati	on of responsibilities b dication Guidelines reg	y one individua	for any
. Official Budget	Representative (City/Cou			President of Boar	d of
Name:			Title:		
Address	E .		City:		
Zip			Phone:		
E-mail:			Fext		
. Project Directo	r				
Name			Title: City:		
Zip			Phone:		
E-mail:			Fax:		
. Financial Office	r				
Name:			Title:		
Address			City:		
Zip			Phone:		
E-mail:		- 0	Fex:		
5. 3333333	Recorder (Required for El	ty and Counties Onl			- 11
Name			Title:		
Address	3		City:	1974 1 1	
Zip			Phone:		
E-meil:			Ран г		
Please review t	oof read your application he RFP checklist for any dendum, Resource Disclo	additional documen	tation that may be req	uired (such as I	etters of
support, VDCA ad	activating increases and a				

Section 6. Signature Page

Fill in sections A thru C (Section D, fill in if City or County).

Click **Finalize Application** to finalize this application. An application cannot be edited or changed once it has been finalized.

Click **Save** to Save Information on this Page.

Click **Print Draft** to print a draft of this application.

Click **Back** to Go back to Previous Page.